

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/796,241
Applicant : Timothy D. Price
Filed : 03/09/2004
FOR : RADIAL POPPET-TYPE CHECK VALVE WITH CLOSURE ASSIST FEATURE
Docket No. : 1970/51
Customer No. : 23638



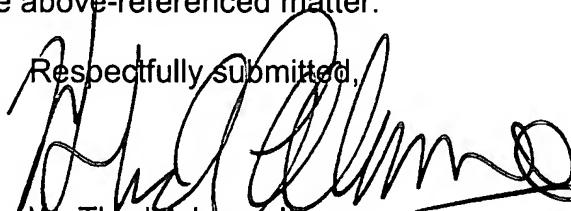
STATUS REQUEST

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

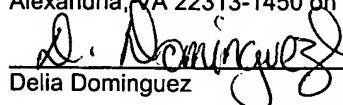
The applicant filed the above-referenced application on March 9, 2004. The return receipt postcard, filing receipt and Notice of Recordation of Assignment Document have been received from the Patent and Trademark Office. However, as of this date, we have not received any other correspondence in reference to this application.

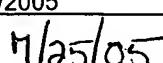
It is therefore respectfully requested that the Patent and Trademark Office reply to the undersigned as to the status for the above-referenced matter.

Respectfully submitted,

W. Thad Adams, III
Attorney for Applicant
Reg. No. 29,037

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 Delia Dominguez

 7/25/05
Date of Signature

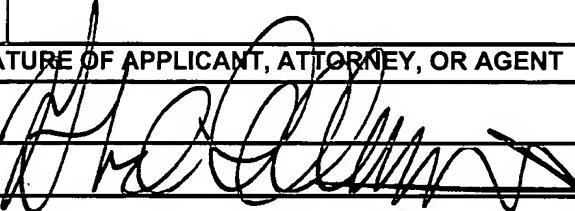
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/796,241
Total Number of Pages in This Submission	2	Filing Date	03/09/2004
		First Named Inventor	Timothy D. Price
		Art Unit	3753
		Examiner Name	Not Yet Assigned
		Attorney Docket Number	1970/51

ENCLOSURES (Check all that apply)

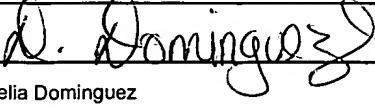
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input checked="" type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
If there are any fees due in connection with this matter, please charge Applicant's Deposit Account No. 01-0265.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	ADAMS EVANS P.A.		
Signature			
Printed name	W. Thad Adams, III		
Date	07/25/2005	Reg. No.	29,037

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Delia Dominguez	Date	07/25/2005

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